

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	RL	902	05/04/01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral)..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
Final Original	
1	7-16-02
2	10-23-02
3	4-14-03
22	N N N
23	N N N
24	✓ V A
25	✓ V A
26	✓ V A
27	✓ V A
28	✓ V A
29	✓ V A
30	✓ V A
31	✓ V A
32	✓ V A
33	N N N
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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